

# 2016 FEDERAL PROGRAMS CONFERENCE

## Working Together for All Kids: **THE WHOLE CHILD**

### VENDOR APPLICATION AND CONTRACT

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Email \_\_\_\_\_

Daytime Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Website (if applicable) \_\_\_\_\_

**Brief Description of Company Product/Service:**

- ☐ **Yes, I will donate a door prize.** Drawing will be held Monday afternoon and pick-up during breakfast on Tuesday morning. Description of prize:

Value of Prize \$\_\_\_\_\_

- ☐ **No, I will not be providing a door prize.**

**Name(s) of Company or Organization Representative(s):** Name badge(s) will be provided.

1. \_\_\_\_\_

2. \_\_\_\_\_

- ☐ **I would like to be a sponsor for the Monday afternoon coffee break at a fee of \$750 (four sponsorships available).** Sponsors will receive preferred single display space and acknowledgement in the conference program.

#### **DISPLAY FEES:**

Registration deadline: In order to be included in conference materials, your vendor application, accompanied by full payment, must be postmarked on or before August 15, 2016

**Nonprofit Display Table** \_\_\_\_\_ @ \$250 (if postmarked after 8/15, cost is \$300) \_\_\_\_\_

**For-Profit Display Table** \_\_\_\_\_ @ \$300 (if postmarked after 8/15, cost is \$350) \_\_\_\_\_

(Each display will include: one six-foot skirted table, two chairs, one wastebasket, one ID sign, and complimentary meals (breakfast and lunch on Monday and breakfast on Tuesday) for up to two representatives. For additional furnishings, electricity or booth handling requests, please complete the additional amenity and shipping forms which will be posted on the conference website).

**FOOD AND BEVERAGE FEES:**

The price of a display includes breakfast and lunch on Monday and breakfast on Tuesday for up to two representatives. Please include the names of additional company/organization representatives below. The inclusive price shown is per person, and payment for all additional representatives is due with the submission of the Vendor Application and Contract.

**Breakfast and lunch on Monday and breakfast on Tuesday** \_\_\_\_\_ @ \$50/person \$ \_\_\_\_\_

**Name(s) of additional company/organization representative(s):**

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**VENDOR PRESENTATIONS:\***

The 2016 Federal Programs Conference will be offering the opportunity for vendors to conduct a one-hour session/presentation on Monday afternoon, September 26, from 4:15 – 5:15 p.m. Fee is \$150.

**Title of Presentation** \_\_\_\_\_

**Lead Presenter Name/Job Title** \_\_\_\_\_

**Program Description/Abstract** (to be used in the conference program)

Briefly describe the objectives and content of your presentation, and ways in which participants will be engaged and use the information. (50 words or less.)

**Session Outcomes**

Participants will be able to:

- 1.
- 2.
- 3.

\*Please note the number of sessions offered is limited, and a presentation is subject to approval by the conference program committee. Session acceptance is on a first-come, first-served basis, and vendor must be registered to display in order to be considered for a presentation.

**SUMMARY OF FEES**

Sponsor Fees Due	
Coffee Break Sponsorship (\$750)	\$
Display Fees Total	\$
Food and Beverage Fees Total	\$
Vendor Presentation Fee (\$150)	\$
<b>TOTAL AMOUNT DUE</b>	<b>\$</b>

**Full payment for all fees must accompany this contract in order to secure display space and/or session consideration.**

## METHODS OF PAYMENT

- Checks made payable to: Custom Meeting Planners.  
Mail to: Custom Meeting Planners, P.O. Box 30785, Columbia, MO 65205.

- Credit Cards (5% service charge applicable)

☐ MasterCard      ☐ Visa      ☐ Discover

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CRV \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Address (Street, City, State, Zip) \_\_\_\_\_

## VENDOR AGREEMENT

We agree to abide by the provisions set forth in this contract and understand that payments made for display space are non-refundable. The vendor assumes the entire responsibility and liability for losses, damages and claims arising out of vendor's activities on the hotel premises and will indemnify, defend and hold harmless the hotel, its owner and its management company as well as their respective agents and employees from any and all such losses, damages and claims.

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

### Please return contract to:

Custom Meeting Planners  
P.O. Box 30785  
Columbia, MO 65205

If you have any questions or need further assistance, contact: Tammy Bagley, Custom Meeting Planners, at (573) 881-4849 or [tammy@custommeetingplanners.com](mailto:tammy@custommeetingplanners.com).

This vendor application and contract is a fillable form. Save the form to your desktop, complete the form electronically and email it as an attachment to: [tammy@custommeetingplanners.com](mailto:tammy@custommeetingplanners.com). Or you may print the completed form and mail it with your payment to: Federal Programs Conference, c/o Custom Meeting Planners, P.O. Box 30785, Columbia, MO 65205.

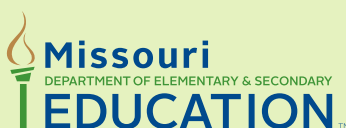
## 2016 FEDERAL PROGRAMS CONFERENCE

September 25-27, 2016

Tan-Tar-A Resort, Osage Beach, Mo.

Conference Website:

<http://www.dese.mo.gov/quality-schools/federal-programs/news-and-updates>



Missouri Department of Elementary and Secondary Education